U.S. Department of Agriculture (USDA), Food, Nutrition and Consumer Services (FNCS); U.S. Department of Health and Human Services (HHS), Office of Disease Prevention and Health Promotion (ODPHP)

To: 2020 Dietary Guidelines Advisory Committee - c/o FNCS and ODPHP

Re: 2020-2025 Dietary Guidelines for Americans (DGA)

Fellow Scientists,

Like seventeen of you, I am a member of the American Society for Nutrition (since 1971). I also served as a member of the Technical Advisory Group to the Committee on Nutrition of the American Academy of Pediatrics from 1984 to 1995. I labored in industry rather than academia, focused on infant formula and baby food research and development, both in the U.S. and internationally. Given this background, I find it personally and professionally discouraging to see so many Americans, both the young and the old, becoming obese. There really is an Obesity Epidemic in this country.

My reason for preparing these comments is that the obesity epidemic began about the time that the DGA were legislated as the law of the land in 1990, and I believe that the connection between the DGA and the obesity epidemic is causal as well as casual.

You may be aware that USDA/HHS solicited public comments on the 2020-2025 DGA in March 2018. I submitted a comment which focused on the lack of any experiential basis for the restriction on whole milk and full-fat dairy in our diets and especially the diets of children. I documented several situations wherein whole milk is nutritionally superior to lowfat (1% milkfat) and nonfat milk. A copy of my 2018 comment is attached to this comment

I subsequently visited the USDA/HHS website to read the comments of others and I urge you to do the same, or to ask the agencies if they have a synopsis of the public comments. I was impressed by the large number of comments from middle-aged and older Americans, including at least one physician, who followed the DGA religiously and consumed a low-fat diet for decades. They experienced a progression from a healthy weight, to overweight, to obesity, hypertension and Type 2 diabetes. In their frustration, they recently adopted a low-carbohydrate diet and were able to reverse the process. I have no expertise to judge the pros and cons of "keto diets" but they seem to work for some individuals and I hope that you provide perspective on low-carbohydrate diets that will influence the DGA 2020-2025 that will be created by the agencies. I recently stumbled upon a relevant twelve-year population follow-up in men (Holmberg & Thelin, 2013), where a high intake of dairy fat was associated with a lower risk of central obesity and a low dairy fat intake was associated with a higher risk of central obesity. The favorable result of a high dairy fat intake confirms my personal experience over the past forty years.

The four most recently published Dietary Guideline for Americans (DGA) editions acknowledge that American children are becoming more overweight and more obese with each iteration of the Dietary Guidelines, as the data from NHANES nutrition surveys document an epidemic of overweight and obesity that has arisen during past 40 years, particularly since 1990.

- "The number of overweight U.S. children has risen dramatically in recent years." DGA 2000-2005
- "Dramatic increases in the prevalence of overweight have occurred in children and adolescents of both sexes, with approximately 16 percent of children and adolescents aged 6 to 19 years considered to be overweight (1999–2002)." DGA 2005-2010
- "In the early 1970s, the prevalence of obesity was 5% for children ages 2 to 5 years, 4% for children ages 6 to 11 years, and 6% for adolescents ages 12 to 19 years." "In 2007–2008, the prevalence of obesity reached 10% for children ages 2 to 5 years, 20% for children ages 6 to 11 years, and 18% for adolescents ages 12 to 19 years." DGA 2010-2015
- "Nearly one-third of children and youth are overweight or obese. These high rates of overweight and obesity and chronic disease have persisted for more than two decades." DGA 2015-2020

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The most recent NHANES data document a continually increasing prevalence of overweight and obesity among children over the years 1999 to 2016 (Skinner, Ravanbakht, Skelton, Perrin, & Armstrong, 2018). Among children 2-19 years-old, the prevalence of overweight (≥ 85th percentile) and the prevalence of obesity (≥ 95th percentile) for 2015-2016 are 35.1% and 18.5%, respectively. Children aged 2 to 5 years showed a sharp increase in obesity prevalence in 2015-2016 compared with the previous 2013-2014 cycle, from 9.3% to 13.7%. The prevalence of overweight in these young children increased from 25.1% to 26.0%.

"Low-fat milk products. Milk and milk products provide almost a quarter of the total calories children eat. Although they make substantial contributions of calcium, phosphorus, vitamins A, D, and B2, and protein, they also provide a good deal of the total fat, saturated fat, cholesterol, and sodium, as well as a fair amount of sugar in children's diets. By the simple step of substituting vitamin D-fortified skim milk for whole milk, the total fat, saturated fat, and energy can be reduced substantially while intakes of the protective nutrients are preserved. This is probably the simplest single recommendation that can be given to parents. Most children are accustomed to the taste and "rich feel" of whole milk, and so a gradual "weaning" process, rather than an out-and-out switch, is sensible. By mixing reconstituted skim milk from powder in equal proportions with whole milk, homemade 2 per cent milk can be produced easily at a substantial savings over usual fluid milk costs. Gradually, the ratio can be increased to two parts skim to one part whole milk, and the result is a nearly skim milk with slightly more body and lower cost than skim milk bought in a store." (Dwyer, 1986)(emphasis added).

Dwyer (1986) described how to implement, but she also foretold how children would react. I hope that these comments are useful in your deliberations.

Sincerely,

Richard C Theuer, Ph.D. Raleigh, North Carolina rtheuer@bellsouth.net

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